

**PROGRESS PAYMENT OR CERTIFICATION OF COMPLETION
AND INSPECTION REPORT**

Date: _____

Contractor Name: _____ Contract Number: _____

Check Appropriate Box:

- ☐ Advance on Contract.
- ☐ Billing for partial payment number _____ based on _____ % of completion – inspected and approved for payment.
- ☐ Contract/project completed according to specifications and approved for payment.

Comments:

Inspected/ Approved By:

Title:
